

ISSUE SLIP STATEMENT (for original cross references)

| POSITION            | INITIALS | ID NO. | DATE     |
|---------------------|----------|--------|----------|
| FEE DETERMINATION   | m. G     |        | 10/22/99 |
| O.I.P.E. CLASSIFIER |          | 7      | 10-28-99 |
| FORMALITY REVIEW    | RS       | 61730  | 11-9     |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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| Claim    | Date     |
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| Final    |          |
| Original |          |
| 1        | 10/02/99 |
| 2        | 10/03/99 |
| 3        | 10/03/99 |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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